

JAN. 22. 2004 5:01PM

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NO. 7611 P. 1

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Total # of Pages: 15 (including this page)

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| Examiner C. Delacroix-Muirhead - Art Unit 1614<br>Commissioner for Patents | (703) 306-3227 | (703) 872-9306 |

From: Stephen E. Reiter

SR

Sender's Direct Dial: 858.847.6711

Date: January 22, 2004

Client/Matter No: 071243-1404

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### MESSAGE:

#### OFFICIAL

Re: Application Serial No. 09/937,840

Following are copies of:

Amendment Transmittal (3 pgs.-in dupl.. = 6 pgs.);

Response to Restriction Requirement (8 pgs.).

If there are any problems with this transmission or if you have not received all of the pages, please call 858.847.6700.

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Atty. Dkt. No. ABI1550-1  
(071243-1404)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

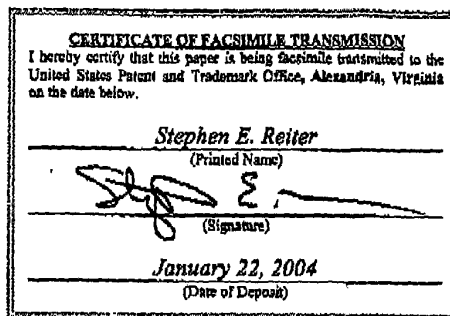
Applicant: Soon-Shiong and Desai  
Title: LONG TERM  
ADMINISTRATION OF  
PHARMACOLOGICALLY  
ACTIVE AGENTS

Appl. No.: 09/937,840

Filing Date: 01/28/2002

Examiner: C. Delacroix-Muirhead

Art Unit: 1614



**AMENDMENT TRANSMITTAL**

Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

☐ Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a previous assertion of Small Entity status.

☐ Assertion of Small Entity status is enclosed.

☒ The fee required for additional claims is calculated below:

|               | Claims<br>As<br>Amended |   | Previously<br>Paid For |   | Extra<br>Claims<br>Present |   | Rate    |   | Additional<br>Claims Fee |
|---------------|-------------------------|---|------------------------|---|----------------------------|---|---------|---|--------------------------|
| Total Claims: | 21                      | - | 20                     | = | 1                          | x | \$18.00 | = | \$18.00                  |
| Independents: | 5                       | - | 5                      | = | 0                          | x | \$86.00 | = | \$0.00                   |

Atty. Dkt. No. ABI1550-1  
(071243-1404)

|  |          |   |         |
|--|----------|---|---------|
| First presentation of any Multiple Dependent Claims: + | \$290.00 | = | \$0.00  |
|  | 0        |   |         |
| CLAIMS FEE TOTAL =                                     |          |   | \$18.00 |

☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

|  |            |         |
|--|------------|---------|
| <input type="checkbox"/> Extension for response filed within the first month:  | \$110.00   | \$0.00  |
| <input type="checkbox"/> Extension for response filed within the second month: | \$420.00   | \$0.00  |
| <input type="checkbox"/> Extension for response filed within the third month:  | \$950.00   | \$0.00  |
| <input type="checkbox"/> Extension for response filed within the fourth month: | \$1,480.00 | \$0.00  |
| <input type="checkbox"/> Extension for response filed within the fifth month:  | \$2,010.00 | \$0.00  |
| EXTENSION FEE TOTAL:   |            | \$0.00  |
| <input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):     | \$110.00   | \$0.00  |
| CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:                                    |            | \$18.00 |
| <input type="checkbox"/> Small Entity Fees Apply (subtract 1/2 of above):      |            | \$0.00  |
| TOTAL FEE:   |            | \$18.00 |

☒ Please charge Deposit Account No. 50-0872 in the amount of \$18.00. A duplicate copy of this transmittal is enclosed.

☐ A check in the amount of \$\_\_\_\_\_ is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such

Atty. Dkt. No. ABI1550-1  
(071243-1404)

extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to  
Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address  
indicated below.

Respectfully submitted,

Date: January 22, 2004

FOLEY & LARDNER  
Customer Number: 30542  
Telephone: (858) 847-6711  
Facsimile: (858) 792-6773

By



Stephen E. Reiter  
Attorney for Applicant  
Registration No. 31,192